



City of Helena

Dog Complaint Report

Date: _____
Time: _____

Complainant Information

Name: _____ Telephone: (____) _____ - _____
Address: _____

Complaint

Is this a dog bite case? ☐ Yes ☐ No

Dog/Dog Owner Information

Description of Dog (please include size and color): _____

Location of Dog: _____

Type of location (please check one): ☐ Residence ☐ Business ☐ Roadway/Neighborhood
☐ Other: _____

Owner of Dog (If known): _____

Owner's Address (If known): _____

Complainant's Signature: X _____

Do Not Write Below this Line - City Use Only Below

Officer's Report: _____

Investigating Officer's Signature: X _____

For bite case, has rabies control been notified? ☐ Yes ☐ No Date: _____ Time: _____

☐ Citation Issued ☐ Incident/Offense Report Filed ☐ 10 Day Quarantine Ordered

City Animal Control Officer's Report: _____

